

Congress of the United States
Washington, DC 20515

April 23, 2021

The Honorable Rosa DeLauro
Chairwoman
Subcommittee on Labor, Health and Human
Services, Education and Related Agencies
Committee on Appropriations
2358 Rayburn House Office Building
Washington, DC 20515

The Honorable Tom Cole
Ranking
Subcommittee on Labor, Health and Human
Services, Education and Related Agencies
Committee on Appropriations
2358- B Rayburn House Office Building
Washington, DC 20515

Dear Chairwoman DeLauro and Ranking Member Cole,

As you consider the Fiscal Year (FY) 2022 Labor, Health and Human Services, Education and Related Agencies (Labor HHS) appropriation bill, we write to thank the committee for its past work to address the HIV/AIDS epidemic in the United States, and urge you to uphold this commitment as you formulate the FY 2022 Labor HHS appropriations bill.

Over one million Americans are living with HIV, with 37,600 new infections each year. HIV remains a non-curable infectious disease but advances in prevention and treatment have decreased new infection rates and improved the quality and length of life for those managing the disease. While great strides have been made in HIV research, as well as access to the support services needed to ensure impacted populations adhere to their care and treatment, more must be done to achieve the goal of ending this epidemic once and for all.

Funding to support HIV prevention, health care, and treatment is especially critical as our country faces the opioid crisis. Increases in injection drug use across the country are resulting in new HIV outbreaks, especially in areas with scarce public health resources. Healthcare providers, health departments, first responders, and AIDS services organizations routinely provide overdose prevention and substance use disorder services and treatment to individuals at risk for or living with HIV. Now is not the time to step away from the great progress that has been made by local efforts to address these coexisting public health threats.

We are encouraged by the Biden Administration's commitment for HIV prevention, care and treatment for **the Ryan White HIV/AIDS Program, HIV prevention programs at the Centers for Disease Control and Prevention (CDC), and the Health Resources and Services Administration's (HRSA) Community Health Centers Program** and urge the committee to build upon funding increases in FY 2021 final bill. Below are specific discretionary programs we ask you to support, along with accompanying justifications.

The Ryan White HIV/AIDS Program

The Ryan White HIV/AIDS Program, acting as the payer of last resort, provides medications, medical care, and essential coverage completion services to almost 550,000 low-income, uninsured, and/or underinsured individuals living with HIV. Those living with HIV who are in

care and on treatment have a much higher chance of being virally suppressed, leading to reduced transmission of the virus – over 85 percent of Ryan White clients have achieved viral suppression compared to just 49 percent of all HIV-positive individuals nationwide. This is achieved through clients' access to the high-quality patient centered, comprehensive care that the Ryan White Program provides, which enables it clients to remain in care and adhere to treatment.

The Ryan White Program continues to serve populations that are disproportionately impacted by HIV, including racial and ethnic minorities, who make up three-quarters of Ryan White clients. Almost two-thirds of Ryan White clients are living at or below 100 percent of the Federal Poverty Level. To improve the continuum of care and progress toward an AIDS-free generation, sustained funding for all parts of the Ryan White Program is needed. With a changing and uncertain health care landscape, continued funding for the Ryan White Program is critically important to ensure that those at risk of or living with HIV have uninterrupted access to health care, medications, and services.

For FY 2022, we urge you to fund the Ryan White HIV/AIDS Program at a total of \$2.768 billion:

- **Part A: \$731.1 million**
- **Part B (Care): \$437 million**
- **Part B (ADAP): \$968.3 million**
- **Part C: \$225.1 million**
- **Part D: \$85 million**
- **Part F/AETC: \$58 million**
- **Part F/Dental: \$18 million**
- **Part F/SPNS: \$34 million**
- **Ending the Epidemic Plan: \$212 million**

CDC HIV Prevention and Surveillance

There has been incredible progress in the fight against HIV/AIDS over the last 30 years. Because of the efforts by CDC's National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention (NCHHSTP) and its grantees, hundreds of thousands of new infections have been averted and billions of dollars in treatment costs have been saved. This confirms that HIV prevention efforts are working. Through expanded HIV testing efforts, largely funded by the CDC, the number of people who are aware of their HIV status has increased from 81 percent in 2006 to 87 percent. Yet many communities are still experiencing increased rates of HIV infection. Continued funding for CDC's HIV prevention programs will support HIV testing, targeted prevention interventions, public education campaigns, and surveillance activities. Ending HIV will take a multifaceted approach. This funding supports a combination of effective evidence-based approaches including testing, linkage to care, condoms, and syringe service programs, and it also supports access to pre-exposure prophylaxis (PrEP), the FDA approved drug that keeps HIV negative people from becoming infected.

For FY 2022, we urge you to fund the CDC Division of HIV/AIDS Prevention at \$1.293 billion and the Opioid Related Infectious Diseases program at \$120 million.

HIV/AIDS Research at the National Institutes of Health

AIDS research supported by the NIH is far-reaching and has supported innovative basic science for better drug therapies, and behavioral and biomedical prevention interventions, saving and improving the lives of millions around the world. Specifically, AIDS research supported by the NIH has proved the efficacy of PrEP, the effectiveness of treatment as prevention, and the first partially effective AIDS vaccine. We are appreciative of the committee's work to increase

funding for the NIH in recent years and urge you to direct some of these resources to continued HIV/AIDS research so that more effective HIV treatments and ultimately a cure can be realized.

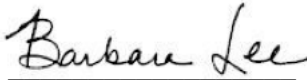
For FY 2022, we request that the NIH Office of AIDS Research receive a total of \$3.845 billion.

Thank you for your continued leadership and support of domestic HIV/AIDS programs that serve the more than one million people living with HIV in our communities across the country.

Sincerely,



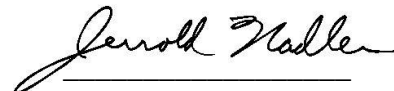
Bill Pascrell, Jr.
Member of Congress



Barbara Lee
Member of Congress



Maxine Waters
Member of Congress



Jerrold Nadler
Member of Congress

Member of Congress

Domestic HIV/AIDS Program Letter, FY22

List of Signatories

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